

Substitute for Form PTO-876

Application or Docket Number

101527023

(Column 1)

(Column 2)

SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

OR

OTHER THAN
SMALL ENTITY

RATE (\$)	FEE (\$)
X	
X	
TOTAL	

MULTIPLE DEPENDENT CLAIM PRESENT (87 OFR 1.16(i))

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
x 25 =	
x 100 =	
180	
TOTAL	
ADD'L FEE	

OR

OTHER THAN
SMALL ENTITY

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X 50 =	}
OR	X 200 =	
OR	360	
OR	TOTAL ADD'L FEE	

RATE (\$)		ADDITIONAL FEE (\$)
X	11	
X	11	
TOTAL ADD'L FEE		

OR

DATE	DESCRIPTION	RATE (\$)	T
12/1/78	1000	1000	1000
12/2/78	1000	1000	1000
12/3/78	1000	1000	1000
12/4/78	1000	1000	1000
12/5/78	1000	1000	1000
12/6/78	1000	1000	1000
12/7/78	1000	1000	1000
12/8/78	1000	1000	1000
12/9/78	1000	1000	1000
12/10/78	1000	1000	1000
12/11/78	1000	1000	1000
12/12/78	1000	1000	1000
12/13/78	1000	1000	1000
12/14/78	1000	1000	1000
12/15/78	1000	1000	1000
12/16/78	1000	1000	1000
12/17/78	1000	1000	1000
12/18/78	1000	1000	1000
12/19/78	1000	1000	1000
12/20/78	1000	1000	1000
12/21/78	1000	1000	1000
12/22/78	1000	1000	1000
12/23/78	1000	1000	1000
12/24/78	1000	1000	1000
12/25/78	1000	1000	1000
12/26/78	1000	1000	1000
12/27/78	1000	1000	1000
12/28/78	1000	1000	1000
12/29/78	1000	1000	1000
12/30/78	1000	1000	1000
12/31/78	1000	1000	1000
1/1/79	1000	1000	1000
1/2/79	1000	1000	1000
1/3/79	1000	1000	1000
1/4/79	1000	1000	1000
1/5/79	1000	1000	1000
1/6/79	1000	1000	1000
1/7/79	1000	1000	1000
1/8/79	1000	1000	1000
1/9/79	1000	1000	1000
1/10/79	1000	1000	1000
1/11/79	1000	1000	1000
1/12/79	1000	1000	1000
1/13/79	1000	1000	1000
1/14/79	1000	1000	1000
1/15/79	1000	1000	1000
1/16/79	1000	1000	1000
1/17/79	1000	1000	1000
1/18/79	1000	1000	1000
1/19/79	1000	1000	1000
1/20/79	1000	1000	1000
1/21/79	1000	1000	1000
1/22/79	1000	1000	1000
1/23/79	1000	1000	1000
1/24/79	1000	1000	1000
1/25/79	1000	1000	1000
1/26/79	1000	1000	1000
1/27/79	1000	1000	1000
1/28/79	1000	1000	1000
1/29/79	1000	1000	1000
1/30/79	1000	1000	1000
1/31/79	1000	1000	1000
2/1/79	1000	1000	1000
2/2/79	1000	1000	1000
2/3/79	1000	1000	1000
2/4/79	1000	1000	1000
2/5/79	1000	1000	1000
2/6/79	1000	1000	1000
2/7/79	1000	1000	1000
2/8/79	1000	1000	1000
2/9/79	1000	1000	1000
2/10/79	1000	1000	1000
2/11/79	1000	1000	1000
2/12/79	1000	1000	1000
2/13/79	1000	1000	1000
2/14/79	1000	1000	1000
2/15/79	1000	1000	1000
2/16/79	1000	1000	1000
2/17/79	1000	1000	1000
2/18/79	1000	1000	1000
2/19/79	1000	1000	100

		FEE (\$)
OR	X	=
OR	X	=
OR		
OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

“ If the “Highest Number Previously Paid For” IN THIS SPACE is less than 20, enter “20”.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The highest number previously paid for (total or independent) is the highest number found in the appropriate box in column 1. The collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments or suggestions for improvement should be forwarded to the Bureau of the Census, Office of Management and Information Systems, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.